

EMPLOYMENT APPLICATION

It is our policy to provide equal employment opportunities to all qualified persons without regard to legally protected status in accordance with applicable local, state or federal law. Employment is conditioned upon applicants' ability to show proof of identity and employment eligibility.

Date: / / **Position Applying For:** **Salary Desired:**

Application Information

Name: Last First Middle

Are there any other names under which your employment, education, or other information may be verified? Yes No

If 'Yes', list those names:

Contact Information

Home Street Address	Apt. No.	Primary Telephone Number	Alternate Telephone Number
City	State	Zip	Email

Are you 18 years of age or older? Yes No

Have you ever applied for a job with or worked for this company before? Yes No

If 'Yes', please explain:

Are you a relative, spouse, significant other, domestic partner or co-habitant of a current SP+, Standard Parking and/or Central Parking Systems (CPS) employee? Yes No

If 'Yes', please provide name(s) and relationship(s):

Employment Experience

Company, Address and Name of Direct Supervisor	Dates Employed (Month and Year)	Rate of Pay	Position Title and Description of Duties	Reason for Leaving
	From: /	Start \$ Per		
	To: /	Final \$ Per		
	From: /	Start \$ Per		
	To: /	Final \$ Per		
	From: /	Start \$ Per		
	To: /	Final \$ Per		
Periods of Unemployment	From: / To: / Reason:		From: / To: / Reason:	

May we contact your present employer for verification?

Yes Phone number to verify employment: - - -
 No Contact at a later date (e.g., after offer accepted) Date: / /



Education and Training

Type of School	Name and Mailing Address of School	Number of Years Attended	Graduated	Type of Degree and/or Major of Study	Grade Point Average
High School (last attended)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Vocational School Technical School Junior College			Yes <input type="checkbox"/> No <input type="checkbox"/>		
College or University			Yes <input type="checkbox"/> No <input type="checkbox"/>		

Please identify other training or information you think would be helpful to us in considering you for employment, such as additional work experience, activities, accomplishments, volunteer work.

Driver's License Details

*This section to be completed by ONLY those applicants applying for a position which requires driving.

Driver's License Number: _____ State: _____ Expiration: ____ / ____ / ____

Has your driver's license been revoked in the last seven years? Yes No

If 'Yes', please describe the circumstances:

Applicant's Certification

I understand that I will be employed at will, with no express or implied employment contract. I understand that either I or the Company has the right to terminate the employment relationship at any time, with or without cause and with or without notice. No officer or employee of SP+ Corporation or any of its affiliated entities has the authority to alter or amend this relationship, or enter into any employment agreement contrary to the foregoing unless such agreement is in writing, signed by the CEO, President or an Executive Vice President. Any earlier oral or written promises or statements regarding employment that may have been made are void and superseded.

I hereby give the Company the right to make a thorough investigation and verification of my past employment, education, and activities and I release all persons and/or entities listed above, in my resume, or other pre-employment materials from any and all liability for damages arising from the supplying such verification and information.

Certain positions of employment will expose employees to valuable confidential business information and trade secrets of the Company or its clients. I acknowledge that employment in (or promotions to) certain company positions will require, as a condition of employment or promotion, that I execute a Confidentiality Agreement and, if appropriate, an Employment Agreement containing confidentiality provisions and other restrictions.

I certify that the facts set forth in this application for employment are true and correct to the best of my knowledge. I understand that any misrepresentations or omissions in my application, resume or other materials, or during the interview, may result in refusal of employment, or if I am employed, my termination.

Signature: _____ Date: ____ / ____ / ____